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FROM: Rick Shoop

DATE: December 13, 2005

Number of pages with cover page:	6	
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Preparer of this slip has confirmed that facsimile number given is correct: 10852/say4

Comments:

ATTORNEY DOCKET NO.: 146712013300 CLIENT REF. NO.: STL 3369
GROUP ART UNIT: 2862
EXAMINER: K. Whittington
SERIAL NO.: 10/685,680
FILING DATE: October 15, 2003
INVENTORS: Shih-Fu LEE et al.
TITLE: HIGH THROUGHPUT MISSING PATTERN DETECTOR FOR SERVO PRINTED
RECORDING MEDIA

Papers attached:

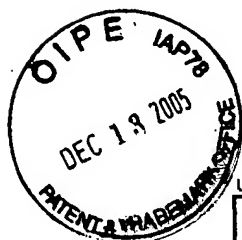
1. Transmittal (1 page)
2. Form PTOL 85 - Part B - Fee(s) Transmittal + duplicate copy for fee processing (2 pages)
3. Power of Attorney (1 page)
4. Statement Under 37 CFR 3.73(b) (1 page)

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PTO/SB/21 (09-04)

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<h2 style="text-align: center;">TRANSMITTAL FORM</h2> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	10/685,680
		Filing Date	October 15, 2003
		First Named Inventor	Shih-Fu LEE
		Art Unit	2862
		Examiner Name	K. Whittington
		Attorney Docket Number	146712013300
Total Number of Pages in This Submission		5	

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address (1 page) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Form PTOL 85 - Part B - Fee(s) Transmittal + duplicate for fee processing (2 pages) 2. Statement Under 37 CFR 3.73(b) (1 page) 3. Fax cover sheet
<div style="border: 1px solid black; padding: 2px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MORRISON & FOERSTER LLP (Customer No. 50269)		
Signature			
Printed name	Rick Shoop		
Date	December 13, 2005	Reg. No.	45,763

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